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## BIB DATA SHEET

CONFIRMATION NO. 4536

<b>SERIAL NUMBER</b> 10/772,078	<b>FILING or 371(c) DATE</b> 02/03/2004 <b>RULE</b>	<b>CLASS</b> 351	<b>GROUP ART UNIT</b> 2873	<b>ATTORNEY DOCKET NO.</b> 1232-5273		
<b>APPLICANTS</b> Toshifumi Masaki, Tochigi, JAPAN; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> JAPAN 2003-025987 02/03/2003 JAPAN 2003-025988 02/03/2003 JAPAN 2003-029074 02/06/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/04/2004						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/JESSICA T STULTZ/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWINGS</b> 13	<b>TOTAL CLAIMS</b> 13 <b>2</b>	<b>INDEPENDENT CLAIMS</b> 3 <b>1</b>
<b>ADDRESS</b> MORGAN & FINNEGAN, L.L.P. 3 WORLD FINANCIAL CENTER NEW YORK, NY 10281-2101 UNITED STATES						
<b>TITLE</b> Ophthalmologic apparatus						
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			